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RECEIVE

SEC 1972 Potential persons who are to respond to the collection of information contained in this (6-02) form are not required to respond unless the form displays a currently valid OMB control number.

ATTENTION

Failure to file notice in the appropriate states will not result 0606 the federal exemption. Conversely, failure to file the appropriate notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

PROCESSED DEC 1 5 2006

FORM D

THOMSOPTICE OF SALE OF SECURITIES FINANCIPURSUANT TO REGULATION D. NOV 2 8 2006

SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION 10

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response...1

SEC	USE ON	ILY
Prefix		Serial
DAT	E RECEI	VED

Name of Offering ([] check if this is an amendment and name has changed, and indicate change.)
Loan #M01844 New Light Missionary Baptist Church
Filing Under (Check box(es) that apply): [X] Rule 504 [] Rule 505 [] Rule 506 [] Section 4(6) [] ULOE
Type of Filing: [X] New Filing [] Amendment
A. BASIC IDENTIFICATION DATA
Enter the information requested about the issuer
Name of Issuer ([] check if this is an amendment and name has changed, and indiciate change.) BDM Mortgage Services, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 21601 Devonshire Blvd. #116, Chatsworth, CA 91311 (818) 708-8889
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)

Page 2 or 1
Type of Business Organization
[X] corporation [] limited partnership, already formed [] other (please specify):
[] business trust [] limited partnership, to be formed
Month Year
Actual or Estimated Date of Incorporation or Organization: [0]8] [9]5] [X] Actual [] Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) $[C][A]$
GENERAL INSTRUCTIONS
Federal:
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.
Filing Fee: There is no federal filing fee.
State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper

amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

- · Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and



Check Box(es) that Apply:	[] Promoter [x] Beneficial Owner	[x] Executive Officer	[x] Director [] General and/or Managing Partner
Full Name (Last name	e first, if individual)			
Aranda, Da	aniel	······································		
Business or Residenc	e Address (Number and Street,	City, State, Zip Cod	le)	
21601 Devo	onshire Blvd., #116, Cha	tsworth, CA 913	311	·
Check Box(es) that Apply:	[] Promoter [X] Beneficial Owner	[X] Executive Officer	[X] Director [] General and/or Managing Partner
Full Name (Last name	first, if individual)			
Thomas, Ro	obert		·	
Business or Residenc	e Address (Number and Street,	City, State, Zip Cod	le)	 _
21601 Deve	onshire Blvd., #116, Cha	tsworth, CA 913	311	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director [] General and/or Managing Partner
Full Name (Last name Business or Residenc	e first, if individual) e Address (Number and Street,	City, State, Zip Cod	e)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner			General and/or Managing Partner
Full Name (Last name	first, if individual)		An and the second secon	· .
Business or Residence	e Address (Number and Street,	City, State, Zip Cod	е)	
Check Box(es) that Apply:	[] Promoter [] Beneficial Owner	[] Executive Officer	[] Director []	General and/or Managing Partner
Full Name (Last name	first, if individual)		· · · · · · · · · · · · · · · · · · ·	
Business or Residence	e Address (Number and Street,	City, State, Zip Code	9)	
	[] Promotor [] Panaficial		[] Director []	

Apply:			Owne	er	0	ficer			Man Parti	aging ner
Full Name (Last na	me first, i	f individu	ıal)		· · · · · · · · · · · · · · · · · · ·			 		
Business or Reside	nce Addi	ess (Nur	nber and	Street,	City, Sta	te, Zip C	ode)			
Check Box(es) that Apply:	[]F	romoter	[] Bene Owne			ecutive ficer	[]	Director	[] Gene Mana Partr	
Full Name (Last nai	ne first, i	f individu	al)							
Business or Reside	nce Addr	ess (Nun	nber and	Street,	City, Sta	te, Zip C	ode)			
(Use I	olank sh	eet, or c	opy and	use add	ditional	copies o	f this sh	eet, as i	necessa	ry.)
		1	B. INFOR	RMATIO	N ABOL	IT OFFE	RING			
1. Has the issuer so offering?			suer inter						_	es No x] []
2. What is the mining						_			\$	1,000.00
3. Does the offering	permit jo	oint owne	ership of	a single	unit?	•••••		*****		es No x][]
4. Enter the information directly or indirectly connection with sale person or agent of a line name of the bropersons of such a bonly.	, any con es of sec a broker o ker or de	nmission urities in or dealer aler. If m	or simila the offeri registere ore than	r remunding. If a period with the five (5)	eration for person to ne SEC a persons	or solicita be listed and/or wi to be list	ition of p d is an a th a state ed are as	urchaser ssociated e or state ssociated	i, s in d s, list	
ull Name (Last nan	ne first, if	individua	al)		.,			· .		`
Business or Resider	ice Addre	ess (Num	ber and	Street, C	City, Stat	e, Zip Co	ode)			
lame of Associated	Broker o	r Dealer		<u>-</u>			· ·			
States in Which Pers	•						sers			-
Check "All State		•			•		ניין ז	[] All S	
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MT] [NE] (NV)		[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RI] [SC] [SD]		[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)

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Busine	ess or R	esidènc	e Addre	ss (Num	ber and	Street, 0	City, Stat	e, Zip Co	ode)			
												· · · · · · · · · · · · · · · · · · ·
Name	of Asso	ciated B	roker or	Dealer								
States	in Whic	h Perso	n Listed	Has So	licited or	Intends	to Solici	t Purcha	sers			
(Che	ck "All	States	or ch	eck inc	lividual	States)		•	[J All S	tates
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]		[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
												
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			-			Street, C	ity, State	e, Zip Co				
Busine	ess or Re	esidence	-	ss (Num		Street, C	ity, State	e, Zip Co				
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1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

Type of Security Debt Fractional Loan Interest Equity	Aggregate Offering Price \$ 67,000.00	
[] Common [] Preferred	Ψ	Φ
() Common () referred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify).	\$ 67,000.00	\$ 67,000.00

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under <u>Rule 504</u>, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

Accredited Investors	Number Investors	Aggregate Dollar Amount of Purchases \$
Non-accredited Investors	2	\$ 67,000.00
Total (for filings under Rule 504 only)	2	\$ <u>6673000.00</u>

Answer also in Appendix, Column 4, if filing under ULOE.

3. If this filing is for an offering under <u>Rule 504</u> or <u>505</u>, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.

Type of offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		_\$
Rule 504Fractiona	1 Interest	\$5,386,200.00
Total		\$

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	ر از	· [']\$0
Printing and Engraving Costs		[]\$ 0
Legal Fees		[]\$0
Accounting Fees		[]\$0
Engineering Fees		[]\$ 0
Sales Commissions (specify finders' fees separately)		[]\$0
Other Expenses (identify)		[]\$0
Total		[]\$0

b. Enter the difference between the aggregate offering price given in response to Part C
 Question 1 and total expenses furnished in response to Part C
 Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

£67,000.00

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

·	·	Payments to Officers, Payments Directors, & To Affiliates Others
Salaries and fees		[] \$_0
Purchase of real estate	************	[]
Purchase, rental or leasing and installation of mag		[] [] \$ 0 \$ 0
Construction or leasing of plant buildings and facil	ities	[] ·[] \$ 0 \$ 0
Acquisition of other businesses (including the valuse securities involved in this offering that may be use exchange for the assets or securities of another is pursuant to a merger)	ed in ssuer	[] [] \$_0 \$_0
Repayment of indebtedness	·······	[] \$ 0
Working capital		[] [] \$ 0 - \$ 0
Other (specify): <u>Investment in Trust Deeds</u>		[]
		[] \$0\$ 0
Column Totals Total Payments Listed (column totals added)	•	[]
D. FEDERA	L SIGNATURE	
The issuer has duly caused this notice to be signed by t filed under Rule 505, the following signature constitutes Securities and Exchange Commission, upon written req any non-accredited investor pursuant to paragraph (b)(2)	an undertaking by the issuest of its staff, the information	er to furnish to the U.S.
Issuer (Print or Type)	Signature	Date
issuer (Filin or Type)	Signature -	
BDM Mortgage Services, Inc.	May the	11-22-06
Name of Signer (Print or Type)	Tifle of Signer (Print or Ty	pe)
Daniel Aranda	Vice President	
ATTE	ENTION	
Intentional misstatements or omissions of fac U.S.C	ct constitute federal crim . 1001.)	nal violations. (See 18

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State

provi	sions of su	ıch	d in 17 CFR 230.2	·	•	ŕ	•	ion	Yes No
rule:						for state respon			
			suer hereby unde otice on Form E						
			suer hereby unde by the issuer to		urnish to	the state adm	inistrators	s, upon wr	itten reque
to be filed estab The i	entitled to and under lishing the ssuer has	o the Utrstands at these read thi	suer represents the iform limited Country that the issuer of conditions have a notification and the undersignal.	Offering Extaining the been satisticated the been satisticated the been satisticated the beautiful t	emption availab fied.	(ULOE) of the cility of this exe	e state in imption h	which this as the bure	notice is den of
Issue	r (Print or	Type)				Signature	··· <u>_ ·</u> ·	Date	
		•	•					1	- (
Name	e of Signer	(Print o	r Type)		·—_·	Title (Print	or Type)	<u>.</u>	
Instri	iction:								
form.	One copy	y of eve	e of the signing ry notice on For f the manually s	m D must	be manu	ally signed. A	ny copies	not manu	
	:			ΛP	PENDL	X			
1	Type of security Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price Type of investor and amount purchased in State (Part C-Item 1) (Part C-Item 2)				,	5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No	,	Number of Accredited Investors		Number of Non-Accredited	I Amount	Yes	No

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